

08-04-05

PATENT  
450106-02851

AF  
JFW

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants : Masashi Nakamura, et al.  
Serial No. : 09/889,374  
For : DIGITAL SIGNAL PROCESSING APPARATUS,  
SYSTEM THEREOF, AND EXTENSION FUNCTION  
PROVIDING METHOD  
Filed : June 16, 2001  
Examiner : Perungavoor, Venkatanaray  
Art Unit : 2132  
Confirmation No. : 2674

745 Fifth Avenue  
New York, NY 10151  
(212) 588-0800

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Date of Deposit: August 3, 2005

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**RESPONSE UNDER 37 C.F.R. § 1.116**

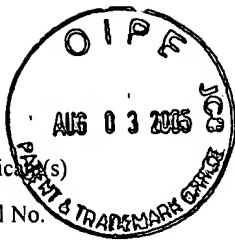
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Sir:

In response to the Final Office Action mailed on June 14, 2005, having a three-month  
statutory period for response set to expire on September 14, 2005, please amend the above-  
identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 3 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.



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THEREOF, AND EXTENSION FUNCTION PROVIDING METHOD  
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745 Fifth Avenue  
New York, NY 10151  
Tel: 212-588-0800

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below.  
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

**Claims as Amended**

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	18	Minus	** = 20	*0x	\$50 (25)	=\$0
Independent claims	4	Minus	*** = 4	*0x	\$200 (100)	=\$0
Total additional fee for this amendment						\$0

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.  
\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$360(180) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the \_\_\_ month following the expiration of the term originally set therefor. This is a petition to request a \_\_\_ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$ \_\_\_ is attached, which covers the cost of ☐ additional claims ☐ petition for extension of time.
- ☐ Charge \$ \_\_\_ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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Barnet Shindler  
(Typed or printed name of person mailing paper or fee)

Barnet Shindler  
(Signature of person mailing paper or fee)

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP  
Attorneys for Applicants

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William S. Frommer  
Reg. No. 75,506  
Tel: 212-588-0800